GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:689
ANSWERED ON:18.11.2016
Women and Child Health
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of current schemes being implemented for Maternal Health, Adolescent Health and Child Health;

(b) whether the Government is getting any financial and technical support from World Health Organisation (WHO); and

(c) if so, the details thereof?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)
a) Government of India has implemented various schems for Maternal, Adolescent and Child Health, which are placed below:
â€¢ Janani Suraksha Yojana (JSY) was launched in April 2005, with the objective of reducing maternal and neonatal mortality by promoting institutional delivery among pregnant women by providing incentive to all BPL/SC/ST pregnant women delivering in Government health facilities/accredited private institutions in both High performing State(HPS) and Low Performing State(LPS) regardless of age of mother and number of children.
â€¢ Janani Shishu Suraksha Karyakaram (JSSK) has been launched on 1st June, 2011, which entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including Caesarean section. The initiative stipulates free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home. Similar entitlements have been put in place for all sick infants accessing public health institutions for treatment.
â€¢ The Pradhan Mantri Surakshit Matritva Abhiyan(PMSMA) has been launched by the Ministry of Health & Family Welfare (MoHFW), Government of India to provide fixed-day assured, comprehensive and quality antenatal care universally to all pregnant women on the 9th of every month. As part of the Abhiyan, a minimum package of antenatal care services

would be provided to pregnant women in their 2nd / 3rd trimesters, by OBGY specialists/ Radiologist/ Physicians at government health facilities, with support from private sector doctors to supplement the efforts of the government.
â€¢ Rashtriya Bal Swasthya Karyakram (RBSK) has been launched to provide child health screening and early interventions services by expanding the reach of mobile health teams at block level. These teams also carry out screening of all the children in the age group 0 − 6 years enrolled at Anganwadi Centres at least twice a year. RBSK covers 30 common health conditions.
â€¢ In order to increase awareness about the use of ORS and Zinc in diarrhoea, an Intensified Diarrhoea Control Fortnight (IDCF) is being observed during July-August, with the ultimate aim of 'zero child deaths due to childhood diarrhoea'. During fortnight health workers visited the households of under five children, conducted community level awareness generation activities and distributed ORS packets to the families with children under five years of age. Around 1.9 crore and 6.34 Crore Under-five children were reached by ASHAs during IDCF 2014 and 2015 respectively and prophylactic ORS packets were distributed to them with counselling for care during diarrhoea.
â€¢ National Deworming Day (NDD): Ministry of Health & Family Welfare had adopted a single day strategy called National Deworming Day (NDD) in 2015 to combat Soil Transmitted Helminths (STH) infections in the children. During NDD, a single dose of Albendazole is administered to the children by school teachers and anganwadi workers.
â€¢ Government of India is implementing the Rashtriya Kishor Swasthya Karyakram. The salient features of the various interventions under RKSK are as follows :
? Weekly Iron Folic Acid Supplementation programme: The objective of the programme is to reduce the prevalence and severity of anaemia in adolescent population (10-19 years). The programme covers adolescent girls and boys enrolled in 6th to 12th class in government/government aided/municipal schools and out of school adolescent girls. Under the programme supervised WIFS are given to these adolescent girls and boys using fixed day approach and biannual deworming for control of helminthic infestation. The adolescents are screened for moderate/severe anaemia and are referred to appropriate health facilities. Nutrition HealthEducation is also imparted to the adolescents by trained nodal teachers.
? Scheme for Promotion of Menstrual Hygiene: The scheme aims at increasing the awareness regarding hygiene practices during menstruation, increased access to and use of hygienic products during menstruation and disposal of such products in an environmentally friendly manner among adolescent girls living rural areas.
? Peer Education:The programme aims to ensure that adolescents between the age of 10-19 years benefit from regular and sustained peer education thus improving life skills, knowledge and aptitude on key focused areas.
Adolescent Friendly Health Clinics: At AFHCs with the presence of trained service providers counselling and curative services (information, commodities and services) are provided at primary, secondary and tertiary levels of care with due referral linkages
b) The Government is getting technical support from the World Health Organisation (WHO) in area of Adolescent, Child Health and

Immunization.

c)The Technical support from World Health Organisation (WHO) for Adolescent and Child Health are placed below:

i. Support the Ministry to strengthen implementation of RKSK

ii. Support for formulation and institutionalization of interventions which address adolescent pregnancy and increased spacing between subsequent pregnancies

iii. work to address risk factors among adolescents to prevent non communicable illnesses

iv. support the Ministry to address data gaps in relation to the information available on adolescents

v. Undertake research and training to build competency of health care providers in the country.

vi. The Child Health Division receives technical support from WHO for the formulation of various technical guidelines like- India Newborn Action plan, Guidelines for Stillbirth Surveillance, Guidelines for Birth Defect Surveillance, Guidelines for setting up Peadiatric Care at District hospitals, etc.

vii. The immunization division is getting technical assistance from WHO for polio and routine immunization which includes capacity building of health manpower, concurrent monitoring of Routine Immunization, Acute Flaccid Paralysis (AFP) surveillance, Measles-Rubella (MR) surveillance and Adverse Event following Immunization (AEFI) reporting.